

Indiana State Police Methamphetamine Laboratory Occurrence Report

This form complies with the statutory requirement set forth in IC 5-2-15-3.

Date: NOV 26, 2008

Address: 9792 CHICKADEE

Case #: 24F29836

CROMWELL, IN

County: KOSCIUSKO

Type of Laboratory Seizure (check one)

- ☒ Operational Lab
☐ Chemical/Glassware/Equipment (only)
☐ Dumpsite (only)

Seizure Location (check all that apply)

- ☒ Residence ☐ Hotel/Motel
☐ Outbuilding ☐ Open - No Structure
☐ Vehicle ☐ Other: _____

Items Found: Location (bedroom, kitchen, open air, etc)

(check all that apply)

- ☒ Lithium/Ammonia Reaction(s): 2 LITER, ACTIVE, MIDDLE BEDROOM, CLOSET
☐ Red Phosphorous/Iodine Reaction(s): _____
☒ Flammable Solvents: LIVING RM, CAMP FUEL
☒ Water Reactive Metal (Lithium): e2 ENERGIZER BATTERIES, LIVING RM
☐ Anhydrous Ammonia: _____
☒ Hydrochloric Acid Gas Generator(s): BACK BEDROOM
☒ Corrosive Acid: DRAIN CLEANER LIQUID ACID, BACK BEDROOM
☒ Corrosive Base: LYE, LIVING RM
☐ Other (item and location): _____

Child under age 18 discovered (check one)

- ☐ Yes _____ (number present)
☒ No

*If yes, fax report to Child Protective Services

Investigative Information

- ☐ Ephedrine/Pseudoephedrine Tracking Log
☐ Retail/Merchant Tip
☒ Other: KCSD

This report is to be faxed to the following agencies that serve the location:

Fire Department: SYRACUSE

Fax: (574) 457-5505

Health Department: KOSCIUSKO

Fax: (574) 269-2023

Child Protection Service: _____

Fax: _____

For further information regarding this methamphetamine laboratory, contact

Investigating Officer: SCOTT GILBERT Phone 219-696-6242

** This form is to be faxed to the Fire Department, Health Department and/or Child Protective Services Department listed within 24 hours of scene processing.

*** This form is to be included with the case file, and a copy sent to the Clandestine Laboratory Team Leader for retention.